Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

# UNITED STATES DISTRICT COURT

FILED - GR

August 30, 2021 2:01 PM CLERK OF COURT U.S. DISTRICT COURT WESTERN DISTRICT OF MICHIGAN BY:JMW SCANNED BY: JW /8-31

for the

Western District of Michigan

#### SOUTHERN DIVISION

CASSADAY, KEVIN W. *9178 - PRO SE	1:21-cv-759  Case No.  United States District Judge
Plaintiff(s)  (Write the full name of each plaintiff who is filing this complaint.  If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)  -V-	Jury Trial: (check one) ✓ Yes No
FEDERAL BUREAU OF INVESTIGATION CHRISTOPHER WRAY - DIRECTOR DETROIT FBI - TIMOTHY WATERS	) ) ) )
Defendant(s)  (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)	) ) )

# **COMPLAINT FOR VIOLATION OF CIVIL RIGHTS**

(Non-Prisoner Complaint)

## **NOTICE**

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

# I. The Parties to This Complaint

### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	KEVIN WILLIAM CASSADAY			
Address	1804 GUENTHER AVE			
	LANSING	MI	48917	
	City	State	Zip Code	
County	EATON 989-615-7096			
Telephone Number				
E-Mail Address	KWCASSADAY@YAHOO.COM - PREFERED			

# B. The Defendant(s)

Defendant No. 1

Name

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

FEDERAL BUREAU OF INVESTIGATION

#### CHRISTOPHER WRAY - DIRECTOR OF FBI Job or Title (if known) 935 PENNSYLVANIA AVE, NW Address 30535 WASHINGTON DC Zip Code City State County Telephone Number 202-324-3000 E-Mail Address (if known) ROTH Individual capacity ✓ Official capacity Defendant No. 2 **DETROIT FBI** Name TIMOTHY WATERS - SPECIAL AGENT IN CHARGE Job or Title (if known) 477 MICHIGAN AVE., 26TH FLOOR Address 48226 DETROIT MI Zip Code City State County Telephone Number 313-965-2323 E-Mail Address (if known) ✓ Official capacity ROTH Individual capacity

Pro Se	15 (Rev. 12	/16) Complaint for Violation of Civil Rights (Nor	n-Prisoner)		
		Defendant No. 3			
		Name			
		Job or Title (if known)			
		Address			
			City	State	Zip Code
		County			
		Telephone Number			
		E-Mail Address (if known)			
			Individual capacity	Official capa	eity
		Defendant No. 4			
		Name			
		Job or Title (if known)			
		Address			
			City	State	Zip Code
		County			
		Telephone Number E-Mail Address (if known)			
		E-Man Address (y known)			
			Individual capacity	Official capa	city
II.	Basis	for Jurisdiction			
	immu Feder	er 42 U.S.C. § 1983, you may sue standities secured by the Constitution at ral Bureau of Narcotics, 403 U.S. 38 itutional rights.	nd [federal laws]." Under Bive	ens v. Six Unknowi	n Named Agents of
	A.	Are you bringing suit against (che	eck all that apply):		
		Federal officials (a Bivens cl	laim)		
		State or local officials (a § 1	983 claim)		
	В.	Section 1983 allows claims alleg the Constitution and [federal law federal constitutional or statutory	s]." 42 U.S.C. § 1983. If you	are suing under se	ction 1983, what
		18 U.S. CODE SECTION 1091 - GENOCIDE; 21 U.S. CODE SECTION 848 - CRIMINAL ENTPRISE 42 U.S. CODE SECTION 3617 - COERCION, INTIMIDATION			
		MICHIGAN CONSTITUTION OF	1963 ARTICLE 1 SECTION 1	, 2, 4, 7, 9, 22, 23,	26
		18 U.S. CODE CHAPTER 113B 18 U.S. CODE SECTION 1510 -	- TERRORISM OBSRUCTION OF CRIMINAL	INVESTIGATION	IS; FOIA
	C.	Plaintiffs suing under Bivens may	y only recover for the violation	n of certain constitu	utional rights. If you

are suing under Bivens, what constitutional right(s) do you claim is/are being violated by federal

officials?

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RETALIATION
WHISLEBLOWERS PROTECTIONS
DEPRIVATION OF RIGHTS
OPPRESSION

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia."
 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

42 U.S. CODE SECTION 1983 - DEPRIVATION OF RIGHTS

21 U.S. CODE SECTION 848 - CRIMINAL ENTERPRISE

42 U.S. CODE SECTION 3617 - COERCION, INTIMIDATION

18 U.S. CODE CHAPTER 113B - TERRORISM; FOIA; RICO ACT

#### III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?

  PLAINTIFF'S LIFE, HE IS NATIVE
- B. What date and approximate time did the events giving rise to your claim(s) occur? NOVEMBER 2019
- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

MR. CASSADAY CONTACTED THE FBI NUMEROUS TIMES ABOUT THE ABUSE IN HIS LIFE, GOING BACK ALMOST TWO YEARS AGO FOR THEM TO PAY ATTENTION....
IF THE FBI DID PAY ATTENTION, WHO IS USING THAT INFO TO HARASS ME?
IF THE FBI DID NOT PAY ATTENTION, IT IS BECAUSE THEY ARE CORRUPT FROM TOP TO BOTTOM, FBI IS FOR AMERICA ALL THE FORIGN LOCATIONS NEED TO CLOSE & ALLOW THE CIA TO DO THEIR ROLE..... WE HAVE THE CIA DOING WORK IN AMERICA & FBI OUTSIDE U.S.? THE FBI HAS FAILED AMERICA, WAITING TILL 1 DAY BEFORE JAN 6, 2021 TO NOTIFY THE IMMENENT THREAT? MR. CASSADAY NOTIFIED YOU ALL REPEATEDLY, BUT THE SITE TO REPORT TIPS WAS DYSFUNCTIONAL, IC3 YOU WANT PEOPLE TO COPY & PASTE EMAILS THAT THEY WANT TO PROVE FONT CHANGE ON THAT YOU WOULD DENY CREDENCE BY THE FBI PURPOSEFULLY SETTING UP A DYSFUNCTIONAL SYSTEM TO SELECT THEIR NARRATIVE. CHRISTOPHER WRAY SAT & TOLD LEGESLATORS ON CAPITOL HILL WE NEED NEW LAWS. I HAVE SOME QUESTIONS FOR OUR LEADERSHIP OF THE FBI WRAY & WATERS.

## IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

EMOTIONAL DISRESS
ACT OF TERRORISM
SLANDER
TORTURE
ABUSE
NEGLECT
WRONGFUL IMPRISONMENT
POISON
ACTS OF WAR
DOUBLE STANDARD
HYPOCRICY
GENOCIDE
NEGLEGENCE

#### V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

ACCOUNTABILITY TO THE FULLEST ALLOWABLE MONETARY TO FULLEST ALLOWABLE, IN EXCESS OF \$75,000

NEW LEADERSHIP - MCL 750.5 FOR ALL ABUSERS (ANYTHING OF THE LIKES)

ALL DEFENDANT' THAT HAVE ENGAGED IN THE TERRORISTIC CRIMNAL ACTIVITY UPON AMERICANS, SHOULD BE BANISHED FROM GOVERNMENT, NON PARDONABLE..

PLAINTIFF WISHES TO RESERVE THE RIGHT TO, MI CONSTITUTION ARTICLE 1 SECTION 24 - RIGHTS OF CRIME VICTIMS

DAMAGES WILL BE COST OF THE FBI PER YEAR OF FAILURE, MULTIPLY THAT BY 3 + 1/3 PRO SE FEES.

# VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

# A. For Parties Without an Attorney

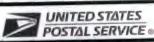
I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	08/26/2021		
	Signature of Plaintiff	Keim Cassaday	Digitally signed by Kevin Cassaday Location: 1804 GUENTHER AVE; LANSING, MI 48917 Date: 2021.08.26 22:13:28 -04'00'	
	Printed Name of Plaintiff	KEVIN CASSADAY		
В.	For Attorneys			
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
		City	State Zip Code	
	Telephone Number			
	E-mail Address			

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Filed 08/30/21 Expected delive Limited internati Most domestic **USPS Tracking** When used inter urance does not cov estic Mail Manual a

# Return Service Requested



# Click-N-Ship®

9489 3036 9930 0000 5564 81 0160 5000 0014 9503 usps.com \$16.05 US POSTAGE

Flat Rate Env Signature Confirmation

U.S. POSTAGE PAID

08/27/2021

Mailed from 48917

# PRIORITY MAIL 1-DAY™

KEVIN W CASSADAY 1804 GUENTHER AVE LANSING MI 48917-8524 Expected Delivery Date: 08/28/21 Ref#: RETURN SVC

0005

RESTRICTED DELIVERY SIGNATURE REQUIRED C040

SHIP OFFICE OF THE CLERK
TO: UNITED STATES DISTRICT COURT 110 MICHIGAN ST NW **STE 399** GRAND RAPIDS MI 49503-2317

**USPS SIGNATURE TRACKING #** 



9489 3036 9930 0000 5564 81

Electronic Rate Approved #038555749



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